

Complete Summary

TITLE

Behavioral health care patients' experiences: percentage of adult patients who reported whether they were given enough information to manage their condition.

SOURCE(S)

CAHPS® surveys and tools to advance patient-centered care
[https://www.cahps.ahrq.gov/default.asp]. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [updated 2006 Jul 24]; [cited 2004 Apr 15]. [2 p].

ECHO® Survey and Reporting Kit 2004. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004. Various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This single-item measure indicates the percentage of patients who reported whether ("Yes" or "No") they were given enough information to manage their condition.

RATIONALE

Consumer ratings and reports of their behavioral health care and the health plan or managed behavioral health care organization (MBHO) that provide that care are important measures of the quality of behavioral health treatment. National efforts to develop quality indicators for behavioral health care by treatment

providers, researchers and policymakers have all included consumer ratings. Moreover, many behavioral health care treatment providers use consumer ratings as a component of their quality improvement processes.

The Experience of Care and Health Outcomes (ECHO) Survey is designed to collect information on patients' experiences with behavioral health care. It produces data that can be useful for patients, clinicians, managed behavioral healthcare organizations (MBHO), health care plans, purchasers, States, and Federal agencies. This ECHO Survey is part of the CAHPS family of surveys, which are developed and supported by a public-private consortium of researchers sponsored by the Agency for Healthcare Research and Quality (AHRQ).

The ECHO Survey can be used for the following purposes:

- To satisfy external standards.
- To improve the quality of mental health and substance abuse services.
- To monitor the quality of behavioral health organizations.
- To hold providers accountable through public reporting.

PRIMARY CLINICAL COMPONENT

Behavioral health care; patients' experiences; getting needed information (self-management)

DENOMINATOR DESCRIPTION

Health plan members age 18 years and older, enrolled in a managed care organization (MCO) or managed behavioral health organization (MBHO) for the previous 12 months with no more than one break in enrollment of up to 45 days during the enrollment period, who received behavioral health care services and who answered the "Getting Enough Information to Manage the Condition" question on the Experience of Care and Health Outcomes (ECHO) Survey

NUMERATOR DESCRIPTION

The number of health plan members from the denominator who indicated "Yes" or "No" regarding whether enough information was provided in order to manage their condition

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance
Variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Eisen SV, Shaul JA, Clarridge B, Nelson D, Spink J, Cleary PD. Development of a consumer survey for behavioral health services. Psychiatr Serv 1999 Jun; 50(6): 793-8. [PubMed](#)

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Behavioral Health Care
Managed Care Plans
Substance Use Treatment Programs/Centers

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Living with Illness

IOM DOMAIN

Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Health plan members age 18 years and older (as of January 1 of the current year), who have been enrolled in a managed care organization (MCO) or a managed behavioral health organization (MBHO) for the previous 12 months with no more than one break in enrollment of up to 45 days during the enrollment period

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Health plan members age 18 years and older, enrolled in a managed care organization (MCO) or managed behavioral health organization (MBHO) for the previous 12 months with no more than one break in enrollment of up to 45 days during the enrollment period, who

- received ambulatory or outpatient and day/night behavioral health care services during the evaluation period including outpatient visits or treatment sessions, medications, partial treatment, or day or night treatment, and
- answered the "Getting Enough Information to Manage the Condition" question on the Experience of Care and Health Outcomes (ECHO) Survey.

Include refusals, non-response, and bad addresses/phone numbers.

Refer to the original measure documentation for further details including administrative codes developed to identify patients who have received services.

Exclusions

- Deceased
- Ineligible (not enrolled in the plan)

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Patient Characteristic

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of health plan members from the denominator who indicated "Yes" or "No" regarding whether enough information was provided in order to manage their condition

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data and patient survey

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Case-mix adjustment

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

CAHPS recommends adjusting the data for respondent age, education, and general health status.

If the sample size is sufficient, responses may be analyzed for specific sub-populations, such as respondents with chronic conditions.

STANDARD OF COMPARISON

External comparison at a point in time
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The ECHO Survey 3.0 is the product of nearly six years of research and testing, as well as extensive consultations with behavioral health care experts and consumers.

The ECHO Development Team produced a draft instrument based on the Consumer Assessment of Behavioral Health Services (CABHS) instrument and the Mental Health Statistics Improvement Program (MHSIP) survey. The draft was reviewed by multiple stakeholder groups; it was also evaluated by survey experts, administrators, mental health providers, and consumers.

The team conducted literacy testing of the draft instrument as well as cognitive testing with individuals who received behavioral health care services. Recommended revisions to the survey based on this testing were reviewed with the ECHO Development Team to produce the draft of the survey that was field tested. The current version of the survey tested at a reading level between 7th and 8th grade.

The team then undertook a field test study to further evaluate the instrument and to refine it for use as a standardized measure of behavioral health care.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Daniels AS, Shaul JA, Greenberg P, Cleary PD. The Experience of Care and Health Outcomes Survey (ECHO): a consumer survey to collect ratings of treatment, outcomes and plans. In: Maruish ME, editor(s). The use of psychological testing for treatment planning and outcome assessment. 3rd ed. Mahwah (NJ): Lawrence Erlbaum Associates; 2004.

ECHO Development Team. Shaul JA, Eisen SV, Clarridge BR, Stringfellow VL, Fowler FJ Jr, Cleary PD. Experience of care and health outcomes (ECHO) survey. Field test report: survey evaluation. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2001 May 8. 100 p. [13 references]

Identifying Information

ORIGINAL TITLE

Getting enough information to manage the condition.

MEASURE COLLECTION

[ECHO® Survey 3.0](#)

MEASURE SET NAME

[ECHO® Survey 3.0 Adult Questionnaire](#)

SUBMITTER

Agency for Healthcare Research and Quality

DEVELOPER

Agency for Healthcare Research and Quality
CAHPS Consortium
Harvard Medical School

ADAPTATION

Measure was adapted from the Consumer Assessment of Behavioral Health Services (CABHS) and the Mental Health Statistics Improvement Program (MHSIP).

PARENT MEASURE

Unspecified

RELEASE DATE

2002 Feb

REVISION DATE

2004 Aug

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

CAHPS® surveys and tools to advance patient-centered care [https://www.cahps.ahrq.gov/default.asp]. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [updated 2006 Jul 24]; [cited 2004 Apr 15]. [2 p].

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MEASURE AVAILABILITY

The individual measure, "Getting Enough Information to Manage the Condition," is published in the "ECHO Survey and Reporting Kit 2004." This Kit may be downloaded from the [CAHPS Survey Users Network Web site](#).

COMPANION DOCUMENTS

The following is available:

- ECHO - the CAHPS behavioral health survey. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2004 [cited 2004 Apr 19]. Available from the [CAHPS Survey Users Network Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI on December 13, 2004. The information was verified by the measure developer on February 11, 2005.

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